



Research Article

A Descriptive Study to Assess the Knowledge Revised Immunization Schedule among Nursing Students of Selected College of New Delhi

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A B S T R A C T

The health of the children has historically been of vital importance to all societies because children are the basic resources of the future mankind. Being vulnerable to diseases, mothers and the children are the major consumers of the health services.¹ As per 2005-2006 family health survey reports, India has approximately 10 million of unimmunized children and only 43.5% of children in India received all of their primary vaccines by 12 months of age.² So, a study was conducted to assess the knowledge among nursing students regarding revised immunization schedule and to disseminate the pamphlet on revised immunization schedule. A quantitative research approach using descriptive research design was used. Data was collected from 100 students of B.Sc. (Hons.) Nursing 3rd year, B.Sc. (Hons) Nursing 4th years and DGNM interns of Rufaida College of Nursing, Jamia Hamdard, New Delhi using purposive sampling. Structured questionnaire was used to assess the knowledge regarding revised immunization schedule among nursing students. The study findings revealed that the majority of nursing students (68%) had poor knowledge score, (27%) had average knowledge and only (05%) had good knowledge of revised immunization schedule. Thus, a pamphlet on revised immunization schedule was disseminated to them to improve their knowledge. The study concludes that most of the student nurses had poor knowledge regarding revised immunization schedule.

Keywords: Nursing Students, Revised Immunization Schedule, Knowledge

Introduction

The WHO (May 1974) officially launched the global programme known as Expanded Program on Immunization (EPI) to protect all the children of the world against 6 Vaccine Preventable Diseases (VPDs) by the year 2000. EPI, launched in India in January 1978 where re-designed as Universal Immunization Programme (UIP) in 1985. The main of UPI is to avert morbidity and mortality due to the 6 childhood

diseases. The scenario that immunization coverage has been steadily increased but the average level remains far less than the desired.³

In 2010 it was estimated that 1.7 million children died from vaccine preventable diseases. It was also noted that 19.3 million children have been incompletely vaccinated, leaving them susceptible to vaccine preventable disease. 50% of all under vaccinated children lives in 3 countries, India being one of them.⁴



Government of India has expanded the Universal Immunization Programme (UIP) by introducing Hepatitis B and Pentavalent vaccination. The second dose of measles vaccine was also introduced in UIP. The target was to vaccinate more than 12 crore children through Supplementary Immunization Activity (SIA) in 14 states. This was estimated to prevent 1 lakh measles related death. Pentavalent, a combination vaccine against five diseases (Diphtheria, Peruses, Tetanus, Hepatitis B and Hemophilus influenza B) has been introduced on pilot basis in 2 States - Tamil Nadu and Kerala - in mid-December 2011 in India.⁵

Previous studies have shown that knowledge and attitudes of the healthcare workers are correlated with higher vaccination coverage rates.^{6,7} Based on the theory that one of the crucial sources of attitude is cognitive information about the target topic, we presumed that better knowledge about immunization would predict positive attitudes. Therefore, the need was felt to assess the knowledge among nursing students regarding revised immunization schedule and to disseminate the pamphlets to improve their knowledge.

Aim

To assess the knowledge among nursing students regarding revised immunization schedule and to disseminate the pamphlet on revised immunization schedule.

Materials and Methods

The present study was aimed to assess the knowledge among nursing students regarding revised immunization schedule and to disseminate the pamphlet on revised immunization schedule so quantitative non - experimental research approach was found appropriate and most suitable for the study and descriptive survey research design was adopted for the study.

The present study was conducted in Rufaida College of Nursing, Jamia Hamdard, New Delhi. The population for the present study comprised of nursing students in Delhi. The sample of the present study comprised of 100 students of B.Sc. (Hons.) Nursing 3rd year, B.Sc. (Hons.) Nursing 4th years and DGNM interns, selected by purposive sampling.

The tool used to collect the data from the samples was structured questionnaire. It was administered to seek information on demographic data of the respondents and to collect data on level of knowledge of nursing students regarding revised immunization schedule.

The data were analyzed using descriptive statistics. The demographic variables of the subjects were described using frequencies and percentages. The level of knowledge of nursing students regarding revised immunization schedule was assessed using mean, median, mode and standard deviation.

Result

Table 1. Frequency and percentage distribution of sample subjects by their demographic characteristics

(n=100)

Demographic profile	Frequency	Percentage
Age (in years)		
a).	19 to21	63
b).	22 to 24	33
c).	25 to 27	04
d).	>27	00
Overall percentage of class attendance		
a).	<65%	10
b).	65- 75%	47
c).	76-85%	19
d).	86-100%	24
Average marks (%) obtained in previous semester		
a).	<50%	05
b).	50-70%	59
c).	71-90%	30
d).	>90%	06
Area of domicile		
a).	Urban	90
b).	Rural	10
Course of study		
a).	DGNM	45
b).	B.Sc. Nursing	55

The data presented in the table 3, shows the maximum number of nursing students (68%) had poor knowledge score, 27% had average knowledge, their score ranged from (50-75%) and only 5% had good knowledge regarding revised immunization schedule.

Table 2. Mean, median, mode and standard deviation of knowledge score of nursing students

(n=100)

Variable	Possible Range of score	Obtained range of score	Mean	Median	Mode	Standard deviation
Knowledge score	0-30	3-26	11.71	11	7	5.82973

Table 3. Frequency and percentage distribution of sample subjects by their knowledge about revised immunization schedule

(n=100)

Ranking	Frequency	Percentage
Good (75%-100%)	05	5%
Average (50%-75%)	27	27%
Poor (0-50%)	68	68%
Total	100	100%

Validation of Pamphlet on Revised Immunization Schedule

A pamphlet for student nurses on revised immunization schedule was prepared to give updated information on revised immunization schedule. The content of the pamphlet included the chart of revised immunization schedule comprising of time, route and dose of vaccines to be administered to children from birth to 16 years.

Criterion rating scale was prepared for the validation of pamphlet. It contained three alternative columns for the experts to mark their opinion. These were Fully met, partially met and not met, a column for remarks or any other addition required for was also given. Pamphlets were given to seven experts for validation. The experts were in the field of nursing. Based on the feedback by the experts the pamphlets were modified and disseminated to student nurses.

Discussion

The findings of the present study show that the maximum number of nursing students (68%) had poor knowledge score, 27% had average knowledge and only 5% had good knowledge regarding revised immunization schedule. The study findings are similar to the findings of the study by Chaitra KM & Yashoda HT which showed that the basic knowledge about vaccines example BCG vaccine itself was surprisingly too low among nursing students. Only 11.6% students knew the correct dose, site and route of administration of BCG vaccine. Even the awareness and knowledge about the adverse reactions and its management was uniformly low. The study concluded that there is a dearth of knowledge about vaccines among the nursing students.⁸

Conclusion

The conclusion drawn from the finding of the study is that majority of the nursing students had poor knowledge regarding revised immunization schedule. Thus, a pamphlet on revised immunization schedule was disseminated to them.

Conflict of Interest: None

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